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CONFIRMATION NO. 6532

SERIAL NUMBER 10/807,746	FILING OR 371(c) DATE 03/24/2004 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 28335/39196A
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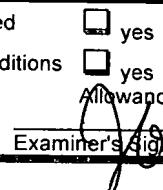
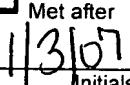
APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/458,234 03/27/2003

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ****
**** 05/11/2004**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature  Initials 		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
OH	7	18	4

ADDRESS

4743

TITLE

Nontypeable haemophilus influenzae virulence factors

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